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WTB Prepares Wounded, Ill and Injured Soldiers for Their Next Steps in Life

By Mass Communication Specialist 2nd Class
John K. Hamilton
NSAB Public Affairs
staff writer

The Warrior Transition Brigade (WTB) onboard Naval Support Activity Bethesda (NSAB) can act as a stepping stone for wounded, ill or injured Soldiers, providing them with a new direction in the next chapter of their lives.

"The mission of the WTB is to heal, educate and transition wounded, ill and injured Soldiers back to the force, meaning back to the Army, or prepare them to serve as productive veterans, meaning going back to American civilian society," said WTB Commander Army Col. Michelle Fraley.

The mission of the WTB can be broken down into three parts.

"Healing is the primary piece of what Walter Reed National Military Medical Center provides, whether it is specialty care or pharmaceutical care," said Fraley. "Although we are not the ones that are doing the healing, we have nurse case managers, social workers and occupational therapists here that basically reinforce the hospital's care plan that has been set up for our wounded, ill and injured Soldiers.

"Secondly is the educating piece. In many cases, the Soldier that returned to the Army can sometimes not return to their original military occupational skill," Fraley added. "For example, if we look at an infantryman who came here, the nature of their injuries could still allow them to be in the Army, however not as an infantryman, but maybe they need to become a signal Soldier. So the education piece has different facets to it. We edu-



Photo by Mass Communication Specialist 2nd Class John K. Hamilton

Wounded warriors participate in the swimming portion of the Warrior Games selection trials in Building 17's fitness center pool onboard Naval Support Activity Bethesda. The Warrior Games is one of many sporting events that wounded, ill and injured Soldiers have the opportunity to participate in as part of their rehabilitation.

cate a Soldier based on their new capabilities and limitations due to their injuries, but we also educate them from the standpoint of new skills so that they can find what they want to do when they grow up. We owe it to them to expose them to other things, educate them and give them skills in other areas so that they can become competitive in either coming back to the Army or returning back to society."

Fraley said the final piece is transition and added that it is important for the WTB to have a solid transition plan, so when they go back to society, if they're medically retired, they can receive the appropriate care and can

continue with their care as they become veterans.

In the WTB, a Soldier's family may be an integral part of the rehabilitation process.

"Here at Bethesda where we have the most complex cases, we have a number of family members: parents, in some instances spouses, relatives or even a friend that we put on orders as a non-medical attendant," said Fraley. "The non-medical attendant basically helps the wounded, ill or injured Soldier with activities of daily living such as: eating, showering, dressing or shaving – those basic things that we take for granted. In some instances we have family

members that we bring onboard because some of the Soldiers need help psychologically, and family members do a lot better at reinforcing whatever treatment the Soldier is receiving."

There are approximately 600 wounded, ill or injured Soldiers on active duty, in the reserves or the National Guard currently receiving assistance from the WTB. Fraley said her job as commander of the WTB is very rewarding and offers an opportunity seldom seen in the Army or the American society as a whole.

"Despite that I have been in the Army for 29 years and I've had five other commands, this command is

unique in the sense that you really get to impact peoples' lives on a daily basis," said Fraley. "Here you're basically impacting their future from the standpoint of shaping what they are going to be doing tomorrow. When you're in a regular Army unit, you're very focused on professional development. This job gives you the opportunity to impact people on a more personal level."

Sgt. Sean Karpf, former infantryman, has been receiving assistance from the WTB for the past 14 months since his injury on active duty left him with a below the knee amputation after

See **TRANSITION** page 10

Chaplain's Corner: The Joys of Summer

King Solomon, the ecclesiastical writer proclaimed, "There is a time for everything, and a season for every activity under the heavens." When pondering this passage, the word "season" tends to dominate my thoughts. The king's priestly declaration brings to mind the time of year known as summer. According to meteorologists, summer lasts for the months of June, July and August. This meteorological definition of summer aligns with the notion that it is commonly viewed as the season with the warmest days of the year in which daylight predominates.

During the summer months, days are longer and the nights are shorter. Children sit on the edge of their seats eagerly awaiting the sound of the bell to ring for the last time of the school year. Parents finalize plans for the family's annual vacation. Generations plan to come together for their long awaited family reunion. The delight of unity over the dinner table is enough to shorten the distance of relatives roving over thousands of miles. Churches and corporations hold their yearly picnic at the park. The smell of barbeque and fresh cut fruit makes the gathering with co-workers meaningful every twelve months. Beaches are swarmed with care-free swimmers and sunbathers as the lifeguards keep



watch. Amusement parks are crowded day in and day out. The interstates are well traveled from sun up to sun down. This is just a mere glimpse of the joyful season referred to as summer. It's the season which tends to bring out the kid in all of us. Bestselling author Mitch Albom puts it all in perspective,

"Go ahead, kids. Lie in the grass. Study the clouds. Daydream. Be lazy. You have our permission."

I believe what Albom is trying to say is that summer, much like certain stages of our lives, passes by quickly. We often get so caught up in the things we are supposed to enjoy that we forget to slow down and take the time to enjoy them. As this gleeful season prepares to come to an end and we return to normalcy (school, homework, regular work schedules), I urge you not to let it pass without slowing down and considering what's important to you. Whether it's from the vantage point of King Solomon or the witty outlook of Mitch Albom, all of mankind is just like the changing of the seasons. Mid-summer is the perfect time to prepare for what's to come in the fall.

**Chaplain (Lt.)
Valerie Eichelberger
NSAB Command Chaplain**

Bethesda Notebook

DAISY Award Ceremony

The quarterly DAISY ceremony will be held today at 10 a.m. in Memorial Auditorium. For more information, call Christina Ferguson at 301-319-4148, or Joan Loepker-Duncan at 301-319-4617.

Suicide Intervention Training

A two-day Applied Suicide Intervention Skills Training (ASIST) will be Aug. 20-21 from 8 a.m. to 4 p.m. each day in the Bethesda Fleet and Family Support Center (Building 11, Rm. 16). Pre-registration and participation in both days of the training are required. The training is open to all. For more information, contact Chaplain (Maj.) Denise Hagler at 301-295-1510 (denise.a.hagler@health.mil, or Religious Program Specialist 3rd Class John Leizinger at 301-319-4706 (john.leizinger@med.navy.mil).

Women's Equality Day

Walter Reed Bethesda staff members and the Army Band "Downrange" will perform Aug. 29 from 11:30 a.m. to 12:30 p.m. in the America Building Atrium (piano area) in celebration of Women's Equality Day. There will also be free food available for sampling and everyone is invited to attend. For more information, call Sgt. 1st Class Jason Zielske at 301-400-3542 or Chief Hospital Corpsman Oluyinka Adefisan at 301-295-6482.

DiLorenzo Clinic Pharmacy

The DiLorenzo TRICARE Health Clinic-Pentagon (DTHC), is closed daily from noon to 1 p.m. Patients may process their prescriptions online by visiting the Walter Reed National Military Medical Center pharmacy refill page, or calling 1-800-377-1723 (refills for all Army and Navy sites, press 2 for Army, 3 for Virginia, and 5 for the Pentagon Clinic options); 240-857-7978 (11th Medical Group, Bolling Air Force Base, D.C.); 240-857-4893 (Malcolm Grow Medical Clinic, Andrews Air Force Base, Md.); 703-697-1188 (Flight Medicine Clinic, Pentagon, D.C.). For more information, visit www.dthc.capmed.mil, or the DTHC facebook page.

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Naval Support Activity (NSA) Bethesda

Commanding Officer: Capt. Frederick (Fritz) Kass	WRNMMC Ombudsman	
Public Affairs Officer NSAB: Joseph Macri	Julie Bondar	443-854-5167
Public Affairs Office NSAB: 301-295-1803	NSAB Ombudsman	
	Jojo Lim Hector	703-901-6730
	Michelle Herrera	240-370-5421
	SARC Hotline	301-442-2053

Journal Staff	
Staff Writers	MC2 John Hamilton MASN April Beazer Sarah Marshall Sharon Renee Taylor Cat DeBinder Ryan Hunter
Managing Editor	MC2 Nathan Parde
NSAB Editor	MC3 Brandon Williams-Church
WRNMMC Editor	Bernard Little

Walter Reed National Military Medical Center
Office of Media Relations 301-295-5727
Fleet And Family Support Center 301-319-4087

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Nursing Grand Rounds Focus on Trauma Acute Care

By Bernard S. Little
WRNMMC Journal
staff writer

The challenges of caring for wounded warriors and trauma acute care at the Nation's Medical Center, was the focus of the second Nursing Grand Rounds (NGR) at Walter Reed Bethesda on Aug. 6.

The NGRs give Walter Reed Bethesda nurses and other providers a forum to share clinical expertise and the best of nursing practice system-wide. Nurses and providers may gain new knowledge, learn new skills or improve current skills through scholarly presentations at NGRs.

Carolyn Craig, performance improvement (PI) coordinator for trauma acute care services (TACS) at Walter Reed Bethesda, served with the 86th Combat Support Hospital in Kuwait and Iraq in 2003 before retiring from the Army. She was the first presenter at last week's NGR.

"We now have a very sophisticated system of combat care, both in the theater of operation and in our fixed facilities in the states," said Craig, a registered and certified operating room nurse. She added Veterans Affairs Polytrauma Rehabilitation Centers support the mili-

tary health care system as well. "Nurses are making a difference in patients' recoveries in so many ways," she continued.

Craig explained Walter Reed Bethesda is part of the Joint Theater Trauma System (JTTS), and has a commitment "that every Soldier, Marine, Sailor or Airman injured on any battlefield or in any theater of operations, has the optimal chance for survival and maximal potential for functional recovery."

The JTTS is "one hospital system over three continents," Craig continued. The JTTS includes a continuum of care which treats warriors from the battlefield and battalion aid station to forward surgical teams within one hour of their injuries (casualty evacuation); to the expeditionary medical facility, combat support hospital or Air Force theater hospital within 24 hours or less (intra-theater aeromedical evacuation); to Level 4 definitive care (inter-theater aeromedical evacuation) within 24 to 72 hours; to medical evacuation to the continental United States for Level 5 care, transitioning to post acute care in the VA system.

The Department of Defense has a trauma registry to document information about the demographics, injury-producing



Photo by Bernard S. Little

Cmdr. (Dr.) Carlos Rodriguez (second from right), trauma medical director at Walter Reed National Military Medical Center (WRNMMC), briefs Rear Adm. (Dr.) Alton L. Stocks (fourth from right), WRNMMC commander, about the arrival of patients to the Nation's Medical Center from Landstuhl Regional Medical Center (LRMC) in Germany. As part of the Joint Theater Trauma System, WRNMMC receives wounded warriors from LRMC or theaters of operation as soon as 72 hours after injury.

incident, diagnosis and treatment and outcome of injuries from the point of injury through rehabilitation, Craig added. "[The registry] generates actionable medical information leading to advancement in trauma care," she said.

According to Craig, there are a number of initiatives to enhance trauma care in both

JTTS as well as Walter Reed Bethesda. Craig said those initiatives include constant review and update of clinical practices based on data analysis, individual patient case reviews and in-theater performance improvement projects, all underway.

Also to improve care, Lt. Cmdr. Jesus Crespo-Diaz, a clinical nurse specialist at Wal-

ter Reed Bethesda, discussed methods to reduce Catheter Associated Urinary Tract Infections (CAUTIs).

To eliminate distractions nurses and care providers may encounter during patient care and medication administration, clinical nurse specialist Mannie

See **GRAND** page 8

School Liaison Officer Assists with Student's Educational Needs

By Mass Communication
Specialist 2nd Class
Nathan Parde
NSAB Public Affairs
staff writer

With the 2013-2014 school year rapidly approaching, families only have a few weeks left to prepare for their students' return to school. Naval Support Activity Bethesda's school liaison officer (SLO), Horace Franklin, is here to help make the transition easier for military families.

"I try to level the playing field, in a sense, for a military child," said Franklin. "I assist military families with their integration into the Montgomery County educational system."

The SLO's primary function is to provide transition support to families within the Department of Defense who have school-age children. The SLO acts as the focal point of contact between the installation commander, parents, the local school administration and the community at large.

"Being a former principle,

I'm very familiar with the educational system, the requirements to register for certain programs and what people are looking for," said Franklin. "I can help a parent locate resources that are in the area and discuss different after-school programs and childcare issues – I try to point them in right direction."

Franklin said one of the biggest challenges that military parents face is relocating and having to change school districts when they are issued new orders approximately every three years.

"One of the most difficult things is establishing relationships with friends and then having to relocate," said Franklin. "The location that the family is moving to may have different course requirements than the state or location that they came from. So, I help parents to know their rights and what they can do when moving from state to state or country to country to make the transition easier for students."

NSAB Fleet and Family

Relocation Specialist Frederick Sherris works in the same office as Dunham and retired from the Navy as a command master chief. He shared that in the past, when he would receive a new set of orders, he would be able to tell his wife where he was heading, but not about the education system there. The Navy created the SLO position to fill in that gap for service members in similar situations, said Sherris.

"The School Liaison Officer Program started in 2009 and I think it is one of the best initiatives that the Navy has come up with," said Sherris. "They now recognize the need to support an active duty service member's family as much as the actual service member."

As families and students prepare for the upcoming school year, Franklin had several tips to share.

"Back-to-school nights are usually held for all grade levels – not just elementary, but also in middle school and high school," he said. "It's also a good idea to walk (or drive) the route that the student will

take to the bus stop or into school in the morning."

And as students return to school, it's important to get back into a routine, said Franklin.

"Start by taking the TV back," he said. "It's important to get back on a routine now, going to bed earlier and monitoring the amount of TV time that the student has. It's also a good idea to have an hour or two of homework time, or time set aside without distractions. I call it an anti-technology time."

One of the questions he is frequently asked is what documents are needed to register for a school, said Franklin.

"One of the biggest things is to make sure that your child's immunizations are up-to-date," he said. "Also, have your child's birth certificate and report card that shows that they passed the last grade and the requirements to move to the next grade level."

Franklin also had advice for students as they return to school.

"First impressions are key,"

he said. "You want to start the school year on the right foot, doing the right things, because that sets the tone for the school year."

"Also, I recommend for students to get involved in extracurricular activities, so they are connected to the school. Middle school and high school can be one of the most exciting times of your life, if you let it be. Whether sports, band, a language or drama club ... get involved with something that you like to do. It makes the schooling experience that much more exciting."

The school year for Montgomery County students starts Monday, August 26. As this date approaches, Franklin, who works with Sherris to support transferring service members, said he is ready and willing to assist with any school-related issues or questions that service members might have.

For more information, contact Franklin by email at Horace.Franklin@med.navy.mil or at 301-295-7849.

August: Medic Alert Awareness Month

Medical Tags, Bracelets Important

By Sharon Renee Taylor
WRNMMC Journal staff writer

Emergency first responders and medics at Walter Reed Bethesda encourage patients with allergies, special needs, internal medical devices or certain medications to wear a medical identification tag. The month of August is designated Medic Alert Awareness Month to educate and bring attention to these life-saving tools.

"The medical ID [alert] speaks for you when you cannot speak for yourself," explained District Fire Chief John Gray of Naval Support Activity Bethesda Fire and Emergency Ser-

vice. "They are your voice."

Worn as a bracelet, necklace or on clothing, a medical identification tag will tell first responders that the individual wearing the tag has a medical condition that may need immediate attention. Unconsciousness, shock, delirium, hysteria, and loss of speech may prevent a person from communicating vital information in medical emergencies.

"It's less of a guessing game when you're dealing with medical ID bracelets because it can point to the problem immediately," said Gray.

Available for purchase at drug stores, pharmacies, and other retail outlets, medical



The metal medical alert bracelet worn by Greta Patten, a Red Cross volunteer at Walter Reed Bethesda, appears unassuming, more like a watch at first, but she explained it contains vital information for emergency medical personnel.

identification alerts can be found as a charm on a bracelet, necklace pendant, or a simple silver band with a red emblem that draws

the attention of paramedics, physician, or emergency department personnel of a medical condition, allergies or certain drugs to help a



Photos by Sharon Renee Taylor

Greta Patten has worn her medical alert bracelet for nearly 23 years.

person get the medical attention and aid that they need. Within the military community, the issuance of a red dog tag, or identification tag, indicates an See **ALERT** page 10

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Nutrition for Cancer Prevention

Doctor, Health Advocate Discusses Healthy Eating for Survival

By Bernard S. Little
WRNMMC Journal
staff writer

"I grew up with the world's worse diet," said Dr. Neal Barnard. "Every day of my life in Fargo [N.D.] was roast beef, baked potatoes and corn, except for special occasions when it was roast beef, baked potatoes and peas," said the son of cattle ranchers and physicians.

Barnard, a clinical researcher, author, adjunct associate professor of medicine at George Washington School of Medicine and founding president of the Physicians Committee for Responsible Medicine, was guest speaker at the Walter Reed Bethesda's Us Too Prostate Cancer Support Group's quarterly meeting on Aug. 1.

"About the time I finished my residency, I quit smoking and changed my diet, trying to make up for lost time," Barnard said.

The physician and health advocate has discussed health issues on documentaries, national news and talk programs, in addition to hosting three PBS programs about healthy eating.

During his presentation at Walter Reed National Military Medical Center (WRNMMC), Barnard addressed nutrition for cancer prevention and survival.

"When we look at how foods can affect cancer, one of the first tools we use is population studies," Barnard explained. "We don't ask people to do anything, we just track what people are eating, choices they are making, and see what patterns emerge."

Barnard discussed a Physicians' Health Study (Harvard, 2001) which showed a high calcium intake, mainly from milk and other dairy products, may increase prostate cancer risk by increasing insulin-like growth factor-1 (IGF-1). He explained IGF-1 in the blood pro-



Photo courtesy of Jane Hudak

Dr. Neal Barnard discusses nutrition for cancer prevention and survival during the Walter Reed Bethesda Us TOO Prostate Cancer Support Group's quarterly meeting on Aug. 1.

motes growth and while the rise in IGF-1 level is an important reason for the bone-building effects of cow's milk, it may also promote undesirable growth of cancers.

"The second thing that happens, and this is peculiar, is milk suppresses the actions of Vitamin D," Barnard said. "There is a cancer-preventive effect of Vitamin D milk interferes with," he explained.

Vitamin D's natural source is sunlight on the skin, Barnard continued. "The prostate is going to benefit from a higher level of Vitamin D, [which] suppresses prostate cancer."

"Vegetarians have lower levels of IGF-1, and people who are on a plant-based diet have slightly lower levels of IGF-1," Barnard added. He said Asian and African countries and other regions where traditional staples of diets are various kinds of legumes and grains tend to have lower cancer rates. As Westernization influence takes away those [dietary practices], cancer rates go up, the doctor said.

Barnard added several heterocyclic amines are likely to be carcinogenic to people because of the way meats, including beef, pork, fish and poultry, are cooked, using high temperature

methods such as pan frying or grilling directly over an open flame. Also, he explained the American Institute of Cancer Research, in its publication, "Food, Nutrition, Physical Activity and the Prevention of Cancer: A Global Perspective," also expressed concern with processed meats such as bacon, sausage, ham, hot dogs and deli meats linked to cancer. The strongest link is with colorectal cancer, but many other forms of cancers may also be linked to the consumption of processed meats.

Lycopene, which gives tomatoes, watermelons and grapefruit their reddish pigment and are "a cousin" of the beta carotene found in carrots, which gives them their orange color, is "a powerful antioxidant [and] cancer preventer," Barnard said. He cited another Harvard study which showed men who ate tomato sauce, "just two servings per week," cut their prostate cancer risk by about a quarter. "If they got more than that, it could cut their risk by a third or even more."

In discussing women, breast cancer and nutrition, Barnard said a woman with a diet low in fiber and high in fat, and has more estrogen, is at a higher risk for developing cancer. But if

she does "a little bit of a diet change, she will get a little bit of result."

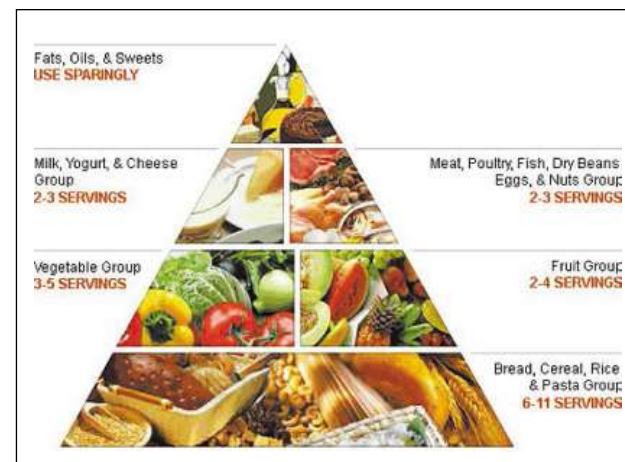
He also encouraged people to maintain a consistent exercise regime.

The nutrition researcher said a healthy diet should include fruits, grains, legumes and vegetables. "There are plenty of proteins in beans, grains and vegetables." He added when people follow a plant-based diet, they can possibly benefit by losing weight, lowering their cholesterol levels, feeling better and surviving cancer. "All of these are reason why I want to stick with it."

"I thought Dr. Barnard's presentation was outstanding in every way," said Jim L. Collins, a prostate cancer survivor who attended the meeting. "His messages were clear and understandable and his humor was timely and well placed. It left me with a lot more information than I had ever been exposed to on the concept of being a vegan."

Vin McDonald, also a prostate cancer survivor and member of the WRNMMC Us TOO Prostate Cancer Support Group, agreed Barnard's presentation was beneficial.

"He made his case for alternative medicine by presenting evidence-



based studies that he discussed convincingly," said McDonald, who underwent a radical prostatectomy at Walter Reed Army Medical Center in February 1998.

"I was especially impressed by his conviction that a holistic approach to overall wellness, for example, nutrition, exercise, and healthy lifestyle, is the 'primary therapy,' and that surgery, radiation therapy, and the like, are the actual 'alternative therapies,'" Barnard added.

Approximately 60 people attended the event at Walter Reed Bethesda, and it was also video teleconferenced at Fort Belvoir

Community Hospital for attendees, said retired Col. Jane Hudak, patient educator for the Center for Prostate Disease Research at WRNMMC.

The Walter Reed Bethesda Prostate Cancer Support Group meets the third Thursday of the month at 1 and 6:30 p.m. in America Building, River Conference Room, adjacent to the Prostate Cancer Center. The group's next meeting is today. For more information, contact retired Col. Jane Hudak at 301-319-2918 or jane.l.hudak.ctr@health.mil.

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Federal Food Drive Provides an Opportunity to Help Those in Need

By Mass
Communication
Specialist 2nd Class
Nathan Parde
NSAB Public Affairs
staff writer

Over the next few weeks, Naval Support Activity Bethesda is conducting a food drive for children and families in need this summer.

"The 'Feds Feed Families' campaign is a voluntary effort undertaken by Federal employees to bring non-perishable food items to their offices for distribution to local food banks," said Deputy Defense Secretary Ashton B. Carter at the start of the summer campaign.

The campaign has received a lot of support in previous years, he added.

"The 2012 food drive was overwhelmingly successful," said Carter. "Food donations across the federal government totaled 7.3 million pounds of food items. The Department of Defense (DOD) alone contributed more than 2.1



million pounds of food, significantly exceeding its goal of 1.5 million pounds. [This year,] we once again will expand the DOD effort to a nation-wide campaign, donating to food banks across the country."

This is the third year that the base is participating in the food drive, said Religious Program Specialist 3rd Class John Leitzinger of the NSAB Pastoral Care Department, who is the point of contact for the base food drive.

"In the National Capital Region, food will be donated to the Capital Area Food Bank, which serves more than 700 food pantries and soup kitchens in the local area," said Leitzinger.

According to the Cap-

ital Area Food Bank's website, there are 641,000 residents in the Washington metro area who are at risk of hunger, and the summer is one of the greatest times of need. This summer also presents additional challenges for families affected by the furlough, said Leitzinger.

"Millions of Americans struggle with hunger on a daily basis," he said, adding that any food donations will help meet that need. "The cost of a can of food or two is trivial ... and if everyone were to donate just one can, it would make a world of difference to those in need."

When considering what items to give, it



Photo by Mass Communication Specialist 2nd Class Nathan Parde

Culinary Specialist 2nd Class Koffi Dussey, Culinary Specialist 2nd Class Joshua Foye and Culinary Specialist 2nd Class Stephanie Cooper each donated items to the 'Feds Feed Families' food drive at Naval Support Activity Bethesda recently.

is best to stick to non-perishable items, said Leitzinger.

"The most needed items include canned vegetables (low sodium or no salt), canned fruits, canned meats (like tuna, salmon, chicken), peanut butter, soups, condiments, snacks, multi-grained

cereals, 100 percent juice, paper products, household items, and hygiene items like diapers, deodorants, toilet paper and tissues."

Donation boxes have been placed by the entrance of Building 11, 17, 50, 60, 61, and 62, as well as four boxes at the Navy Exchange.

The last donations for the NSAB food drive will be taken on August 28, said Leitzinger.

"Give as much as you can," he said. "Anything that you are able to give will help."

For more information about the food drive, contact Leitzinger at 301-319-4706.

Trauma Nursing Core Training, Joint Effort Between Hospitals

By Kristin Ellis
Fort Belvoir
Community Hospital
Public Affairs Office

Fort Belvoir Community Hospital (FBCH) and Walter Reed National Military Medical Center (WRNMMC) are identifying new and innovative ways to deliver healthcare training to America's military.

In an effort to efficiently deliver educational content and courses to medical professionals, the Trauma Nursing Core Course (TNCC) is now offered through video teleconference between the two military treatment facilities. This course is being developed as a best practice for the military to ensure knowledgeable and

highly-trained medical professionals are available.

Pursuing continuing education courses through video teleconferencing (VTC) is also wrought with possible budgetary savings, according to FBCH and WRNMMC officials. Medical facilities can maintain skill and competency levels without travel costs and other associated expenses, they added.

"We started planning this VTC as a different medium to get the information to our students," said Robert Lane, continuing education program director at Belvoir hospital. "By offering the class here, we have ample parking and education space which can potentially help decompress

parking and classroom space [at WRNMMC]."

Beginning last fall, the Emergency Nurses Association made a policy change, allowing video teleconferencing of the TNCC course. Lane and his WRNMMC counterpart, Lt. Cmdr. Linna Walz, assistant service chief staff and faculty development, decided to pool resources and divide the 14 course lectures to reach the maximum amount of students.

Walter Reed Bethesda sent volunteer instructors and faculty to support the first instructor and provider courses held at FBCH in April.

"We anticipate all TNCC courses will be video teleconferenced between WRNMMC and



Photo by Hospitalman Katelin Doran

Fort Belvoir Community Hospital staff participates in the Trauma Nursing Course through video teleconference with Walter Reed National Military Medical Center. Belvoir hospital medical personnel get hands-on training with a mannequin Aug. 1.

Belvoir hospital for the next fiscal year," Walz said. "VTCing the pro-

gram will really open up possibilities for smaller hospitals or reserve cen-

ters who can't sustain a program site without instructor support."

Bassett Chosen President-Elect of WRNMMC Medical Staff

By Sharon Taylor
WRNMMC Journal
staff writer

Navy Cmdr. John T. Bassett has been selected as president-elect of the Walter Reed National Military Medical Center (WRNMMC) Medical Staff. The chief of gastroenterology is currently deployed to Joint Task Force Guantanamo, Guantanamo Bay Cuba where he serves as the deputy commander of the Joint Medical Group.

Bassett will assume his duties as president-elect of the Medical Staff when he returns to WRNMMC in October. He is slated to become president on July 1, 2014 for a one-year term.

"It is a true honor to be selected as the next president of [Executive Committee of the Medical Staff]," Bassett said.

The president of the Medical Staff serves as

the elected representative of the medical staff to the WRNMMC commander, chief of staff, and the Board of Deputy Commanders, explained incumbent president Cmdr. John R. Rotruck. The individual also serves as chair of the Executive Committee of the Medical Staff (ECOMS), comprised of clinical department chiefs and chairs of 16 hospital-wide multi-disciplinary committees, he said.

"It is the role of ECOMS to recommend to senior leadership how we practice medicine at WRNMMC, in a way that maximizes patient safety and quality of care," Rotruck said. "Another key responsibility for the president of the Medical Staff is to serve as the final gateway for providers to become privileged here at WRNMMC before their application comes before



Courtesy photo

**Navy Cmdr.
John T. Bassett**

the chief of staff for approval, as well as dealing with issues of standard of care, and adverse privileging actions.

Rotruck called his experience as president of the WRNMMC medical staff a tremendous opportunity to learn and grow professionally, working with senior leadership to improve the quality and

safety of care provided at the medical center. Since July 1, Rotruck has served as president of the Medical Staff. His term will end on July 1, 2014, when Bassett takes on the role.

Deployed during the entirety of the election process, Bassett said he reached out to as many WRNMMC staff members as possible by phone or email, and plans to represent the interests of all his colleagues with vigor. According to Rotruck, Bassett will represent more than 2,100 licensed independent practitioners privileged at WRNMMC. This group includes physicians, advanced practice nurses, physician assistants, clinical pharmacists, psychologists, audiologists, both physical and occupational therapists, along with social workers who may be military, civilian,

contractors or volunteer.

The incoming president of the medical staff said the goals and objectives he hopes to attain in his new position will be shaped by the priorities the medical staff cited most frequently.

"Specifically, creating a system that reduces administrative burdens on providers and allows them to deliver the best quality of care," Bassett said. "Staffing should be scrutinized to assure we are dedicating resources where they are needed the most. Information management is a key area of interest." Bassett cited access to care and parking as recurring issues important to both staff and patients. "Throughout the year I intend to remain flexible to respond to conditions and issues that arise."

Bassett said he has spent nearly eight of his 15 years on active

duty stationed at what is now WRNMMC. The Fargo, North Dakota-native earned both an undergraduate as well as a medical degree from Wayne State University in Detroit. He completed an internship and residency at the former National Naval Medical Center before completing a fellowship in Gastroenterology with the National Capital Consortium in Washington, D.C., and a fellowship in Transplant Hepatology with the University of Michigan, in Ann Arbor, Mich.

In addition to his position as chief of gastroenterology at WRNMMC, Bassett serves as assistant professor of medicine at the Uniformed Services University of the Health Sciences, in Bethesda, Md.

Computer Classes Train Soldiers for Life After Service

By Ryan Hunter NSAB
Public Affairs staff
writer

In room 14 of building 11, the Introduction to Computer Technology course of the Wounded Warrior Project Transition Training Academy program is held by Technical Trainer Robert K. Watson.

The course prepares Soldiers and caregivers for life after service by offering free computer training to those eligible. "By the time [my students] leave, they can go in the world and get a job as a help desk technician or a network administrator on the ground level," says Watson.

The program is primarily for wounded warriors, but caregivers; wounded, ill or injured active duty members; and veterans who left the military after 2001 are eligible to apply. This also includes active service members who did not sustain battlefield injury. "If you were doing exercise in the morning,



Photos by Ryan Hunter

Caregiver Issac Majid Odvina and Lt. Col. Brenda M. Marlinbanks study for their second A+ Certification Exam.

twisted your ankle, went to sick hall and had something placed in your medical record, you may be eligible," explained Watson. "Almost no one has ever been turned away."

Watson's class has a diverse student body, from caregivers 19 years old, to service members 68 years and older, with varying skills in computer proficiency. "[Watson] teaches at different levels. He helps [students] who don't have a very sophis-

ticated level of computer knowledge until you get comfortable. Then you can jump in and follow the regular class load. I like it. I've learned a lot," said Lt. Col. Brenda M. Marlinbanks.

Conflicts of interest prohibit the school from holding the A+ computer maintenance and repair, Security+, and Network+ certification tests covered in the curriculum on base. Instead, vouchers are given to students to take the



Spc. Edward M. Tjaden demonstrates how to plug cards into the motherboard as Caregiver Issac Majid Odvina, Technical Trainer Robert K. Watson and Lt. Col. Brenda M. Marlinbanks watch.

tests free of charge at a location of their choice. "It's a big deal because it's a \$180 test," said Spc. Edward M. Tjaden, describing the first of his two A+ certification tests. "These are licenses that are recognized worldwide. You can take them anywhere. They're not just limited to the military."

Much of the focus of the course is on hands-on training. "The big bonus for attending is that [everyone in the class] gets a free computer," explained Marlinbanks. "We get the components, install it and make sure it works. That's a part of the training."

Watson was a wounded warrior himself, trained

through the Transition Training Academy, and cites his experiences as they key to the program's success. "Most [of my students] have some type of medical issue. I can better understand what [my students] are going through

See **CLASSES** page 8

GRAND

Continued from 3

Santiago is leading implementing "Sterile Cockpit" and "MED Zone" practices at Walter Reed Bethesda.

In the "sterile cockpit," providers wear orange vests to make others aware they are not to be distracted and follow a checklist to ensure proper patient care and medicine administration procedures are properly carried out, and "MED Zone stands for 'Must Eliminate Distractions' zones," Santiago explained.

A patient safety advisor, Santiago said the MED Zone concept is based on the flight line checklist practice of

mechanics and pilots, who thoroughly inspect all aircraft systems before take-off. Also, while mechanics make critical repairs to the aircraft, they wear orange vests to let people know not to distract them, explained the former search and rescue corpsman.

Cmdr. (Dr.) Carlos Rodriguez, trauma medical director at WRNMMC, explained improvements in trauma care are increasing survivable patients. He said communications throughout the health care system have contributed to this effort. He stressed the proper use of prophylactics to prevent infection and disease in trauma patients.

Nursing Grand Rounds are scheduled quarterly at Walter Reed Bethesda.

CLASSES

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because I've gone through it myself. In a regular school setting that won't happen."

Tjaden is getting medically separated from the Army and plans to use his training in his post retirement career. "I had a couple of surgeries that didn't go the way they were supposed to. So now I'm stuck using a cane and in a wheelchair part of the time," he said. "I happened to meet Mr. Watson and he introduced me to the opportunities in

the IT field. I took the class for job opportunities afterwards and for personal knowledge."

Marlibanks encourages anyone who can to join the class. "It's just another option to prepare you for life beyond the military. And even if you don't intent to work with them it's good to know about computers."

If you are interested in enrolling in the Introduction to Computer Technology course of the Wounded Warrior Project Transition Training Academy program or are interested in having your computer diagnosed for free contact Mr. Watson at 910-528-2320 or rdrillserg@gmail.com.

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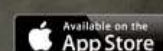
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ALERT

Continued from 4

allergy to penicillin or a similar medication, according to Gray.

The latest forms of medical information alerts are digital. Some contain a USB port that responders can plug into a laptop for instant information.

Gray said emergency medical technicians and first responders are taught very early in their training to look for and identify medical identification alerts.

According to the fire chief, individuals with diabetes, known drug or food allergies, seizure disorders, as well as pacemakers or other medical devices, should wear medical identi-

fication tags. A medic alert emblem also helps to identify people who take blood thinners, insulin or other medications, that may interact with the procedures or treatments used in emergency situations.

Greta Patten, 47, a Red Cross volunteer with her dog Schroeder at Walter Reed National Military Medical Center, has worn her

medical alert bracelet for nearly 23 years. The metal bracelet appears unassuming, more like a watch at first, but she explained it contains vital information for emergency medical personnel.

"Mine has my blood type, a toll-free number where they can get [my] paper record, my emergency contact person, which is my sister... [and] the fact that I'm allergic to tetanus. I also have obstructive sleep apnea, so if I can't speak for myself, the anesthesiologist needs to know... this says no opioids, so they won't put me too far under where I won't come back."

Has she ever had a situation where her bracelet has spoken for her? "So far not," Patten said. "I'm a kind of preventative person. This is the kind of thing you wish you had [in an emergency situation]. I recommend them highly to everybody."

Gray said it's important for children and older adults who have been diagnosed with medical conditions to wear medical identification tags. Food allergies are common with smaller children, especially those allergic to peanuts.

"Autism now is a big one that they're putting on bracelets because sometimes that will indicate that you may have a communication barrier — trying to communicate with someone that may not be able to necessarily express what's going on with them," explained Gray.

He spoke of the "golden hour" with trauma patients, the critical period of time that may change the outcome of an emergency medical situation. The same for stroke patients, Gray said. "There's a big push right now for people who have suffered previous strokes to have that listed on

a medical ID bracelet because the faster we can get them to a stroke center, the less damage is done to the brain and to the body," he said. "Definitive care within a certain amount of time saves lives."

Medical alert identification can mean life or death for a cardiac patient according to the fire chief, especially if a person has a pacemaker or internal defibrillator. "Critical information for us to have when responding to people with chest pains or cardiac arrest and they are not able to verbally convey to us that they have that equipment on board — it changes our treatment options," he said.

Individuals seeking more information about medical identification alerts should contact their primary care provider, according to Gray.

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TRANSITION

Continued from 1

stepping on a pressure plate improvised explosive device. He describes his time with the WTB as beneficial.

"I received all the medical attention I needed from the WTB, anything I needed other than medical was provided," said Karpf. "I just had to reach out and talk to the right people to figure out if there was something I wanted or needed to do. Anytime I wanted to go on a trip or an event the military was providing, I was able to go without problems. It was a great experience."

"Some of the trips I've been on and the events I've been able to go to, I probably would have never been able to do without the WTB," Karpf added. "I was able to participate in a lot of sporting events, and I took part in the Warrior Games this year and the endeavor games. I love sports, so that is my outlet and how I get away, relax and have fun."

Karpf is looking to transition out of the military soon and plans on pursuing a degree in physical therapy when he returns to Jacksonville Fla. During his time at the WTB, Karpf went through various internships which helped him get a sense of what he wanted to do once he is transitioned out of the military.

"While I was here I did an internship through physical therapy, which I really liked. That was another benefit through the WTB,

which opened my eyes as something I want to pursue once I get out of here," said Karpf. "Capt. Ritland in the Military Advanced Training Center (MATC), worked with me and did personal one-on-one classes and talked to me about anatomy. He would give me quizzes on the muscles and parts of the body that he taught me previously. I thought that was helpful. While I was doing that internship, I was also doing another one with adaptive sports, where they showed me how to start programs and receive money from different non-profit organizations to do the different events like trips to Colorado and other trips as part of the rehabilitation process."

"The WTB also has tutors," Karpf added. "I was seeing somebody for math and English, so that way when I go to college I'll have a refresher to go off of and I'm not just going straight into it. It helped out a lot."

Fraley said the best part of her job is seeing how the Soldiers overcome what they have gone through in life both physically and emotionally.

"There's nothing better than coming to work in the morning and going to the MATC and being able to see somebody who was not able to get up, all of a sudden just stand and balance on their prosthetics, and then maybe three or four months later, being able to see them take their first steps," said Fraley. "In a way it is like watching a child grow up and turn into an adult."



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